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No. 5

THE CALIFORNIA ECLECTIC MEDICAL JOURNAL

Incorporating
THE LOS ANGELES JOURNAL OF ECLECTIC MEDICINE
AND THE CALIFORNIA MEDICAL JOURNAL
ISSUED MONTHLY

MAY, 1918

O. C. WELBOURN, A. M., M. D., Editor

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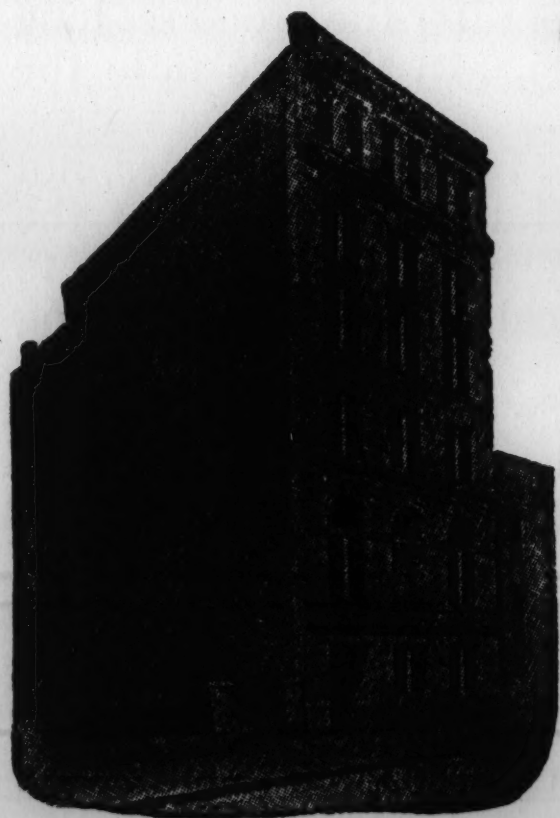
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The California Eclectic Medical Journal

Vol. ~~XXXIX~~ ~~XI~~

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Original Contributions

DELICATE NERVOUS REACTIONS IN DIAGNOSIS AND TREATMENT

John M. Cleaver, M. D., Los Angeles, California

Read before the Los Angeles Eclectic Medical Society

We often lose sight of the immense importance of the sympathetic or autonomic nervous system. We forget, for the time being, the despotic control which this mechanism holds over our physiological activities. We unconsciously fall into the habit of treating disease almost as an entity to be whipped or coaxed, much as we would a refractory child.

Did you ever stop to think just with what delicate nicety the autonomic nervous system keeps us in harmony with the environment in which we live?

A breath of cool air, and how quickly the blood mass is hurried to the warm interior of the body. A gradual warming of the atmosphere, and as gradually comes a return of the blood mass to the peripheral tissues, where the body heat may be radiated so that the body's even temperature may not be shaken.

The very odor of appetizing food brings increased saliva. The presence of ingested food in the stomach is sufficient to pour forth digestant juices suited to the work in hand. Increased muscular action brings increased heart activity. Why?

The autonomic nervous system—always on the alert—always, in health, keeping us right with surrounding nature.

Then why do we ever become ill?

We must again look to the autonomic system—but this time we find it **not** to be on the alert. Something is wrong somewhere, somehow, and we meet changed environmental

conditions unprepared—with blood mass in the wrong place, with deficient secretions, with congestion where we should have anemia—and the result is malfunction—disease and ultimately death.

Therefore it would be apparent that an intact and functioning autonomic system is the first prime requisite for health—yes, for life itself.

We are beginning to find out how delicate the reactions of this autonomic system can be. It is always busy, always changing internal conditions—always adapting itself to varied influences.

Dr. George Starr White of Los Angeles, California, has recently announced some very interesting facts regarding delicate tests as to the integrity of this function-regulating mechanism.

Dr. White has found, and conclusively proved, that so slight a stimulus as the Magnetic Meridian of the earth can and does produce vaso-motor and other changes in the human body.

He has found that a mere change in position from one facing East or West to one facing North or South is sufficient to produce a change, which he terms the "Sympathetic-Vagal Reflex."

This reaction seems to follow a direct stimulation of the vagal nerve—with the stimulation none other than the lines of magnetic force encircling the globe from the south to the north magnetic poles.

Truly this sounds at first like unto the vaporizings of an unbalanced mind, but the demonstrable facts back up his assertions.

With many instruments, such as the organotonometer, vagotonometer, sphygmomanometer, psychophanometer, stethoscope, cardiograph, plethysmograph, and others invented for the purpose, Dr. White has shown this nervous change. Dr. White's method of air-column percussion will also demonstrate this reflex. This he has done before the highest scientific bodies in this country. Not only this, but he has demonstrated that by taking advantage of these phenomena we have given to us a new and accurate method of diagnosis—yes, and of treatment as well.

These discoveries become of diagnostic importance through the fact that only healthy, **non-toxic** individuals give the reaction. When the subject is suffering from some form of intoxication, such as tuberculosis, cancer, syphilis, malaria, gonorrhea, auto-intoxication, etc., the reaction is absent.

But this is not all. Dr. White has found a means of tem-

porarily bringing back to normal this nervous reaction. In other words, even when the patient is afflicted with tuberculosis, with an autonomic system poisoned into a laxity of reaction, he has been able to rhythmically bring about a normal nervous condition.

And more interesting still, he has found that the stimulus which will restore to the patient a normal vagal reaction when suffering from tuberculosis, will always act in this toxemia, even in its earliest stages, but never in syphilis, malaria, etc.

In the same manner the restoring stimulus for syphilis will act specifically in this condition and not in cancer, tuberculosis, etc.

These facts are not only of importance from a diagnostic standpoint, but point out a method of therapeutics as well.

Dr. White's method of diagnosis and treatment work out somewhat as follows: A careful test shows that the patient does not respond to the Magnetic Meridian as a stimulus. This shows that the patient's nervous system is suffering from some form of toxemia and is not keeping him in that careful equilibrium with his environment which is necessary for healthful function.

Now the patient is subjected, one by one, to a series of auxiliary stimulations, until that stimulus is found which restores to the patient a healthy reaction. Under this stimulus the patient's nervous system is functioning as in health. This form of auxiliary stimulation is noted and proves an index to the form of intoxication; for, understand, these experiments have been verified time and time again by the latest forms of laboratory and other methods of diagnosis.

That form of stimulation which restores to the toxemic patient a normal autonomic reaction cannot but be of great therapeutic value. This would seem to follow logically, and from a clinical standpoint it **does** follow.

Thus with this new method of testing nervous reactions it is possible to easily and conclusively ascertain—

First—Whether or not a patient has a normally functioning autonomic nervous system. If he has a normally functioning autonomic system, it is safe to assume that he is not suffering from any form of intoxication. This autonomic system is keeping him in that exact resonance with the media in which he lives which is necessary for perfect health.

Second—It is possible to determine the kind of toxemia which ensues.

Third—A method of treatment is suggested which is

not only rational, but which has proved to be of immense value.

This work of Dr. White's is well out of the beaten path. His findings seem at first so erratic as to be the essence of foolishness. He hesitated long before presenting them to the profession, until he had collected such a mass of confirmatory data and had developed such methods of proof as to lift the whole series of phenomena from the sphere of theory to the sphere of **authenticated fact**.

The rule of the autonomic system is supreme, but it seems that at last a method has been found to make its work a little more uniformly purposeful and beneficial.

DIAGNOSE CAREFULLY

E. R. Petskey, M. D., Douglas, Arizona

Time and time again have I felt the desire to say something about a careful diagnosis, but time has not permitted, till now I have a very forceful case to bring before you.

Last month, while I was enjoying an auto tour through the northern section of Arizona, one of my old patients took very sick. They being unable at the time to get me, called in another medico. This man listened to the woman's tale of woe and suffering, for suffering she sure was. He kept a wide berth and concluded that she only required a dose of Epsom salts. The Epsom salts were administered for twenty-four hours, but no relief was obtained. In the meantime the patient heard of my return to town and phoned to me to come to her house immediately. I went as quickly as I was able and this is what I found:

January 24, 1918. Mrs. R. G., suffering severe pain over McBurney's point. Legs elevated. Vomiting. Temperature 101 deg. F.; pulse 120; respiration 30. She suffers greatly from constipation. Eyes were rather jaundiced. Some tenderness over the region of the gall-bladder, but not severe. No swelling. These symptoms all came on very suddenly. After examining patient very closely I concluded that she had appendicitis, with a possible gall-bladder affection. I prescribed as follows:

Absolute abstinence from all food. A high enema. Chlorodyne tablets for the pain. Tr. Spec. Chionanthus; Tr. Spec. Podophyllin; Tr. Nucis Vomicae; also at intervals pills, Podophyllin a.a., gr. 1-8.

The next day I went back to see her and found that she had put in a pretty bad night and had had a very good clean-

ing out. I was now able to make a more thorough examination, as she was not so tender. Over McBurney's point I found a long and hard mass, something the shape of a sausage, and could trace this lump up to pretty near the gall-bladder. Note, though, that the pain still persisted over McBurney's point. I told her husband that there was only one thing to do and that was to operate at once; also that I would examine the gall-bladder carefully after I had given the appendix attention.

He agreed to my doing anything that I thought would cure her. Owing to the hospital and operating room having been upset on account of the painters, I was not able to operate until 9 o'clock the night of January 25th. I made my incision over McBurney's point, and when I got in, instead of finding the appendix I found a large sausage-shaped body fully an inch and a half in diameter. At first one might have taken this to be a fecal fistula. I traced this body to its full extent and found that it was the gall-bladder. It was very red in color, and at the tip presented an area about the size of a quarter, which had a purple hue to it. This area rested right over the appendical region. Undoubtedly that was the seat of greatest pain and was the reason why I mistook same for appendix. Next I made a stab wound over the region of the gall-bladder and stitched the gall-bladder to the peritoneum, stitching all around, so that there would be no chance for any fluid to escape into the peritoneal cavity. I placed a piece of sterile gauze in this stab wound, thinking that it might set up enough irritation to produce early adhesion. The appendix was next examined and found to be normal, so was left intact. The abdomen was sewed up and patient put back to bed. Instead of appendicitis this was a gall-bladder cyst.

On January 29th the second operation was performed. As soon as I began to remove the strip of gauze there was a slight oozing of a greenish-yellow fluid. I enlarged the incision to about an inch and a half, all told. Opened the gall-bladder and inserted a large sterile rubber tube. This tube was stitched to the tissues to keep it in place. The wound sewed up and the patient put back to bed. A bottle with a little bichloride solution was hung to the bed and into this the tube discharged the fluid.

Patient got along remarkably well. Temperature, pulse and respiration at once went back to normal.

On Sunday, February 10th, in the morning, I removed the tube and dressed the wound. About 3 o'clock that same day the nurse telephoned for me to come up at once. When I

arrived I found the patient looking very low. Temperature went up to 100, pulse 130, respiration 40. From that time on the temperature climbed to one degree higher each hour till it reached 104.6 F. In the meantime I had given a hypo of Pituitary Extract—surgical; Strychnine Sulphate gr. 1-30, and Camphor in oil. I probed the stab wound and had patient turn on her side. The minute she did that she began to vomit freely, and from this time on the temperature dropped down by degrees till it was once more normal.

On examining the vomitus I found that she had eaten chicken that day for lunch and had not chewed it up as finely as she might have. Nine weeks prior to this time I confined her and a few days afterwards she had some chicken for dinner and soon afterwards had a severe chill and temperature. I forgot to mention that when the above happened that she also had a terrific chill. On close questioning I found that this is a peculiar idiosyncrasy. She cannot tolerate chicken. I merely mention this to show how a very simple, insignificant matter can cause a great deal of alarm, worry and deep thought. I was on the verge of opening the belly once more and filling with saline, and also extirpating the gall-bladder. My, what a job she saved me when she began vomiting! Now the patient has made a very uneventful recovery.

Case 2. Baby M. I was called in to see this child about 5 p. m. one afternoon last month. Not to take up so much time in detail, I will say that I made the diagnosis of a very bad case of pneumonia. On questioning the parents as to how long the child had been sick and what had been done for it, I was told that they had had a certain doctor in to see the child for the two days prior to this date, and he prescribed calomel and repeated the dose the second day, stating that there was nothing the matter with the child. I immediately engaged a trained nurse for the case and started active treatment. From 11 o'clock that night till 11 the next morning we kept the child alive with stimulants and artificial respiration. After that time all efforts became fruitless. He died.

Case 3. Another pneumonia baby. No definite diagnosis made. Physician prescribed castor oil. No improvement. I diagnosed pneumonia. Sent the child to a lower altitude. Specialist wrote me later stating that my diagnosis was correct.

I could state others, but feel these will be sufficient. It is not my intention to convey the idea to my readers that I am a diagnostician, for I am not. I merely want to bring

before you the importance of being on the alert. Never hesitate to ask for consultation when in doubt. You will not belittle yourself, but on the contrary the patient will think far more of you and will feel that you are really taking an interest in the case. We are all liable to mistakes.

Case 1 will point out to you not only a case of lack of interest, but also a very interesting case of idiosyncrasy. Lesson: Ascertain what foods your patient can readily tolerate.

Perhaps it might be of interest to some to know what local application I use in bronchitis and pneumonia. At the present time there are many arguments, both pro and con, in regard to local applications in cases of pneumonia. I feel that we cannot do any harm, and do really believe that they do good.

R. Tr. Belladonnae.

Tr. Capsici, a. a.....Dr. jjj

Lloyd's Libradol, q. s.....Oz. vj

Misce.

Smear this on a cloth and apply to chest. Leave it on all night, and in the morning put on a fresh jacket of this ointment, leaving this on all day.

SOME OBSTETRICAL REMINISCENCES

Samuel T. Quick, M. D., Fort Collins, Colorado

When attending lectures in 1872 I remember Prof. John King, of precious memory, telling us we might use a little chloroform in obstetrics, but only while pain was on, but not to complete narcosis. Prof. A. J. Howe said in operating give chloroform until there was complete relaxation or not give it at all. "Fools often walk where angels fear to tread," so as a boy I did some walking. In 1874 I was called to a stout patient in severe labor. She said: "Doctor, can't you do something?"

I gave chloroform and presently patient was snoring. I preserved complete unconsciousness until child was born. No unnatural results, but much praise from patient and family. Consequently soon did as much obstetric work as the other five doctors in town. In 1880 called to a patient at her father's; very poor, not having the real necessities of life, but large family. Patient pale, anemic and cadaverous appearance. Found twins, full time, about seven pounds each, dead, and so decayed that skin slipped wherever touched. I expected patient to die. I thoroughly cleansed

uterus with salt solution, gave her Echinacea and Macrotys. She made a gradual recovery and became mother of two other children.

In 1893 attended Mrs. T. Patient strong, square built, but nervous, and had with her both her mother and mother-in-law, both claiming to be nurses. I kept patient under chloroform partially for twelve hours and called in another doctor, who assisted me for the next six hours while patient was completely narcotized, and delivered her of a twelve-pound boy, who is now a lawyer in Minneapolis.

In 1894 attended Mrs. B. Full time; os well dilated; very little pain; patient nervous. Inserted colon tube in womb; no results. Then used, with fountain syringe attached to tube in womb, four gallons salt solution, when pains came promptly and had fine delivery; results excellent.

1894. Mrs. McD., 43 years old; youngest child 7 years. Found patient sitting over vessel and before I could remove my wraps she remarked, "Something is coming." Put her to bed and found hand in world and cold; shoulder presentation; returned hand, turned child, brought head down, separated pelvic bones and delivered a 12½-pound child. The husband gave chloroform under my directions, as I was too far from town to get assistance. Patient and child today well and living in a neighboring State.

Before the days of auto drove fifty miles into mountains; found patient, a hunchback, thirty-six hours in labor with sixteenth child; back presentation. Gave chloroform, with only a mountain woman neighbor to assist; turned and delivered. Patient made good recovery; child now grown up, and am happy to state mother has had no additional pregnancy.

1895. Patient, Mrs. W., I found in spasms, in which condition she had been for eight hours. She was seven months pregnant, and albuminous. I kept her under chloroform, brought on labor and delivered her of a child which is still living. Mother lived to have two more children.

1898. Mrs. P. I found in labor and unconscious. I said to husband and sister present, "This woman is dying." She was albuminous. I delivered her of twins inside of twenty minutes and she breathed her last before second one was entirely born. One child lived one month, the other three years. Called to hospital to Mrs. O.; found her in spasms from albumen poisoning; asked for council; two other doctors soon arrived; all agreed she would live but few hours and that the thing to do was to deliver. Used the salt solution to bring on labor by flushing the uterus. Delivered her

in forty-five minutes of dead child. Patient lived but six hours.

These cases were all attended, as you will note, before we had many of our modern conveniences or remedies. I have used chloroform in all patients who desired it since 1874, hundreds of times, and no untoward results to mother or child resulted. I always use normal salt solution to cleanse uterus after delivery of afterbirth, and so leave uterus clean of any parts of membranes. Have patient sit over vessel when urinating; don't use bed pan, and use no vaginal douches after the one salt water douche, but insist that nurse keep external genitals clean.

Have never lost a patient in confinement except the three who were dying when I was called. Have used the "twilight sleep," but do not consider it safe or desirable as chloroform, as it occasionally acts disagreeably on child.

BOTANIC VERSUS THERAPEUTIC RELATIONSHIP

Herbert T. Webster, M. D., Oakland, Cal.

The notion has more or less prevailed among medical men from time immemorial that members of the same botanical family are liable to prove similar in therapeutic action. When one member of a family group demonstrates certain therapeutic affinities, they have been somewhat wont to expect similar action when investigating a new member of the same family. Experimentation in botanical drug therapy is thus often embarrassed; for, failing to derive similar results in such cases we are liable to consider the new individual a failure and throw it into the discard.

In a biological sense, we are not justified in expecting parallelism in the therapeutics of botanical family groups. Consanguinity in the human family is not liable to be attended by similarity in individual characteristics. Even brothers, born to the same parents, often afford us striking differences in disposition and energy. They may resemble one another in form and feature, but there the resemblance may end, each affording distinctive peculiarities in social and executive traits. The tangle of heredity is at work here, turning out remarkable complexities in many instances.

Botanists of good repute have informed the writer that *grindelia robusta* and *grindelia squarrosa* are identical botanically—though there is probably a mistake here, for such authorities may have been furnished with two specimens of the same species when arriving at their deductions; yet there is

no dispute that there is a very close resemblance between the two. In my opinion, there is a difference, the squarrosa growing more bulky, its branches more wavy, and inclined to droop, as compared with robusta, and choosing low ground for its habitat, with its location confined to small sections, while robusta is widespread in its distribution. Still, there is no disputing the fact that there is a very close physical resemblance between the two. Naturally, we would expect similar therapeutic properties in the two kinds; and, knowing the action of one, were the properties of the other unknown, would expect to prescribe it in similar conditions. In this instance we would be diverging far from the proper course, for their individual therapeutic properties are widely dissimilar.

Grindelia robusta possesses an affinity for the respiratory organs. Asthmatic conditions and bronchial coughs of asthmatic tendency seem to be the condition most markedly benefited by it, and the place in which we have learned to place confidence in it. We do not expect much more of it when prescribing it as an internal remedy. *Grindelia squarrosa* seeks no such locality in its therapeutic affinity. Any one who has observed the action of this agent carefully, cannot but be impressed with its selective action upon the abdominal viscera. The spleen especially, and secondarily the chylopoietic viscera, are the regions specifically affected. The respiratory organs evince none of its effects. It is the most positive remedy for chronic malaria I have ever found. Here we have two plants so closely related botanically as to confuse skilled botanists, which evince no therapeutic relationship. Other members of the *grindelia* family exist, which possess no therapeutic relationship with either of these, so far as I have been able to determine, though belonging to the same family.

In 1907, the writer visited a son, who is practicing in southwestern Missouri. The month was September, when the numerous members of the *grindelia* family in California bloom. Riding with him in the country to visit a patient one day, I was struck by the resemblance of a blossom on a plant growing profusely along the roadside to *grindelia*, and called a halt for closer inspection. I had supposed that the *grindelia* family was confined to the Pacific coast, and was skeptical that an individual should be found in far-off Missouri. However, the blossom indicated a member of the family, while the sticky, gummy character of the plant carried conviction, and upon submitting the plant to the teacher of botany in the local high school it was named as one of the family, though the distinctive name has now escaped me. I tinctured the

green plant and carried it to Oakland for purposes of experimentation, but found none of the properties existing in the two kinds with which I was already acquainted. Doubtless this plant is a good medicine, if its direction of medicinal action can be discovered, for it possesses the characteristic grindelia odor and seems to be a plant of positive character, but its sphere does not lie along similar lines with its botanic relatives.

Along the same lines of observation lie other family groups. The three species of *ramnus* used in medicine, namely, *ramnus catharticus*—English buckthorn; *ramnus purshiana*—cascara sagrada, and *ramnus californica*, manifest nearly as much diversity of action, though all possess one characteristic—laxative. I have had little experience with buckthorn, and few, if any, physicians prescribe it for any other action than as a laxative. However, I have known dog fanciers to employ it as a remedy with good result where a canine droops, wastes away and refuses to eat. Indeed, I have suggested it to acquaintances on more than one occasion where a remedy of this kind was sought and afterward received good reports from its action. This is certainly a very empirical way of prescribing, and possibly veterinarians could throw more light on the subject; but the matter is mentioned here merely as a matter of illustration, for neither of the other species are known to possess any such property.

Rhamnus purshiana, widely known as cascara sagrada, is too generally used for me to dilate upon its properties. I take it for granted that it is a mild, unirritating laxative, with slightly tonic effect upon the alimentary functions. This action can hardly be credited to *ramnus californica*, which is drastic in its cathartic action, when aroused, and not a very desirable remedy for such purposes, but is an admirable remedy in acute rheumatism and for muscular pain, much more so than *macrotys* or any other remedy we possess for general use. It is more widely adapted to painful conditions than any other remedy we possess, though not always effective because it must be prescribed with discrimination. Many painful states are not due to muscular or fibrous pathology. However, these remarks are intended to suggest a wide difference between the therapeutics of the three kinds of *ramnus*.

We find this disparity between the therapeutics of another important species—that of the *rhus* family. Indeed, there is a wider variation here than in that of the *ramnus* family. No one who is personally acquainted with the action of *rhus tox*, would expect to prescribe *rhus aromatica* in its place.

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The two remedies are far removed from each other in a therapeutic sense and in their respective fields of action. Though both are almost indispensable as remedies, we employ them in entirely different conditions. *Rhus glabrum* is hardly to be thought of where either of the two others are prescribed.

The same argument applies to the *asclepias* family. A knowledge of *asclepias tuberosa* affords us little aid in applying *asclepias syriaca* or *asclepias incarnata* to disease, while both the two last named differ essentially in their therapeutic adaptation. Each member of the family must be studied separately and adapted to an entirely different field.

Thus we observe botanic families sustain little relationship therapeutically. The idea that because related botanically medicinal plants are related therapeutically is best discarded, because it is liable to lead us astray when we are investigating their separate virtues. We must cast all such means of guidance aside and forget the properties of botanical relatives if we are to become intimately acquainted with individual characteristics.

MEDICAL RESERVE CORPS

Office of the Surgeon General,

Washington, April 8, 1918.

To the Editor, California Eclectic Medical Journal,
Los Angeles, California.

1. I wish to call to the attention of the profession at large the urgent need of additional medical officers. As the war progresses the need for additional officers becomes each day more and more apparent. Although the medical profession of the country has responded as has no other profession, future response must be greater and greater. The Department has almost reached the limit of medical officers available for assignment.

2. I am, therefore, appealing to you to bring to the attention of the profession at large the necessity for additional volunteers. So far the United States has been involved only in the preparatory phase of this war. We are now about to enter upon the active, or the fighting phase, a phase which will make enormous demands upon the resources of the country. The conservation of these resources, especially that of man-power, depends entirely upon an adequate medical service. The morning papers publish a statement that by the end of the year a million and a half of men will be in France. Fifteen thousand medical officers will be required for that army alone.

There are today on active duty 15,174 officers of the Medical Reserve Corps.

3. Within the next two or three months the second draft will be made, to be followed by other drafts, each of which will require its proportionate number of medical officers. There are at this time on the available list of the Reserve Corps, an insufficient number of officers to meet the demands of this draft.

4. I cannot emphasize too strongly the supreme demand for medical officers. Will you give the Department your assistance in obtaining these officers? It is not now a question of a few hundred medical men volunteering for service, but it is a question of the mobilization of the profession that in the large centers of population and at other convenient points as well as at all Army camps and cantonments, boards of officers have been convened for the purpose of examining candidates for commission in the Medical Reserve Corps of the Army. An applicant for the Reserve should apply to the board nearest his home.

5. The requirements for commission in the Medical Reserve Corps are that the applicant be a male citizen of the United States, a graduate of reputable school of medicine, authorized to confer the degree of M. D., between the ages of 22 and 55 years of age, and professionally, morally and physically qualified for service.

6. With deep appreciation of any service you may be able to render the Department, I am,

F. C. GORGAS,
Surgeon-General, U. S. Army.

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POLITICAL FREEDOM!

Political freedom means much or little, depending upon your point of view. For instance the German people under the rule of the Kaiser and the Russian people under the rule of the Soviet are each proclaiming to a war-weary world that they have the only pure and unadulterated freedom. And the world if forced to make a choice between these two would do so, doubting which is the lesser of the two evils. But fortunately there is a middle ground between anarchy and autocracy—the usual mean between the two extremes—and the American people have chosen that condition in preference to either horn of the dilemma. And not only have they chosen it, but they have fought and died for it. Furthermore they of this generation are willing to fight and die that others may attain this great boon, as well as to maintain it for themselves.

We believe it is clearly understood by nearly all of us that this war is a fight to the death between the principles of autocracy and democracy, also that beyond a doubt we shall win unless we become faint-hearted and content ourselves

with an inconclusive peace. In the latter event the day of reckoning only would be postponed and the following generations would rightly look upon the present one as a "bunch of slackers." Do you want to be remembered as a physical and moral coward?

"Know ye not who would be free themselves must strike the blow?

By their right arms the conquest must be wrought."—Byron.

PRESIDENT WILSON'S ADDRESS

The President delivered the following address at Baltimore tonight on the occasion of the opening of the Third Liberty Loan Campaign:

Fellow Citizens: This is the anniversary of our acceptance of Germany's challenge to fight for our right to live and be free, and for the sacred rights of free men everywhere. The nation is awake. There is no need to call to it. We know what the war must cost, our utmost sacrifice, the lives of our fittest men and, if need be, all that we possess. The loan we are met to discuss is one of the least parts of what we are called upon to give and to do, though in itself imperative. The people of the whole country are alive to the necessity of it, and are ready to lend to the utmost, even where it involves a sharp skimping and daily sacrifice to lend out of meagre earnings. They will look with reprobation and contempt upon those who can and will not, upon those who demand a higher rate of interest, upon those who think of it as a mere commercial transaction. I have not come, therefore, to urge the loan. I have come only to give you, if I can, a more vivid conception of what it is for.

The Cause We Are Fighting For More Sharply Revealed Than Ever

The reasons for this great war, the reason why it had to come, the need to fight it through, and the issues that hang upon its outcome, are more clearly disclosed now than ever before. It is easy to see just what this particular loan means because the Cause we are fighting for stands more sharply revealed than at any previous crisis of the momentous struggle. The man who knows least can now see plainly how the cause of Justice stands and what the imperishable thing is he is asked to invest in. Men in America may be more sure that, if it should be lost, their own great nation's place and mission in the world would be lost with it. than they ever were before that the cause is their own, and

I call you to witness, my fellow countrymen, that at no stage of this terrible business have I judged the purposes of Germany intemperately. I should be ashamed in the presence of affairs so grave, so fraught with the destinies of mankind throughout all the world, to speak with truculence, to use the weak language of hatred or vindictive purpose. We must judge as we would be judged. I have sought to learn the objects Germany has in this war from the mouths of her own spokesmen, and to deal as frankly with them as I wished them to deal with me. I have laid bare our own ideals, our own purposes, without reserve or doubtful phrase, and have asked them to say as plainly what it is that they seek.

"We Have Ourselves Proposed No Injustice, No Aggression"

We have ourselves proposed no injustice, no aggression. We are ready, whenever the final reckoning is made, to be just to the German people, deal fairly with the German power, as with all others. There can be no difference between peoples in the final judgment, if it is indeed to be a righteous judgment. To propose anything but justice, even-handed and dispassionate justice, to Germany at any time, whatever the outcome of the war, would be to renounce and dishonor our own cause. For we ask nothing that we are not willing to accord.

It has been with this thought that I have sought to learn from those who spoke for Germany whether it was justice or dominion and the execution of their own will upon the other nations of the world that the German leaders were seeking. They have answered, answered in unmistakable terms. They have avowed that it was not justice but dominion and the unhindered execution of their own will.

Avowal of Dominion Came Not from Statesmen, but Military Rulers

The avowal has not come from Germany's statesmen. It has come from her military leaders, who are her real rulers. Her statesmen have said that they wished peace, and were ready to discuss its terms whenever their opponents were willing to sit down at the conference table with them. Her present Chancellor has said,—in indefinite and uncertain terms indeed, and in phrases that often seem to deny their own meaning, but with as much plainness as he thought prudent,—that he believed that peace should be based upon the principles which we had declared would be our own in the final settlement. At Brest-Litovsk her civilian delegates spoke in similar terms; professed their desire to conclude a fair peace and accord to the peoples with whose fortunes they

were dealing the right to choose their own allegiances. But action accompanied and followed the profession. Their military masters, the men who act for Germany and exhibit her purpose, in execution, proclaimed a very different conclusion. We can not mistake what they have done,—in Russia, in Finland, in the Ukraine, in Roumania. The real test of their justice and fair play has come. From this we may judge the rest. They are enjoying in Russia a cheap triumph in which no brave or gallant nation can long take pride. A great people, helpless by their own act, lies for the time at their mercy. Their fair professions are forgotten. They nowhere set up justice, but everywhere impose their power and exploit everything for their own use and aggrandizement; and the peoples of conquered provinces are invited to be free under their dominion!

Might Do Same at Western Front, but for Armies They Can Not Overcome

Are we not justified in believing that they would do the same things at their western front if they were not there face to face with armies whom even their countless divisions can not overcome? If, when they have felt their check to be final, they should propose favorable and equitable terms with regard to Belgium and France and Italy, could they blame us if we concluded that they did so only to assure themselves of a free hand in Russia and the East?

Their purpose is undoubtedly to make all the Slavic peoples, all the free and ambitious nations of the Baltic peninsula, all the lands that Turkey has dominated and misruled, subject to their will and ambition and build upon that dominion an empire of force upon which they fancy that they can then erect an empire of gain and commercial supremacy,—an empire as hostile to the Americas as to the Europe which it will overawe,—an empire which will ultimately master Persia, India, and the peoples of the Far East. In such a programme our ideals, the ideals of justice and humanity and liberty, the principle of the free self-determination of nations upon which all the modern world insists, can play no part. They are rejected for the ideals of power, for the principle that the strong must rule the weak, that trade must follow the flag, whether those to whom it is taken welcome it or not, that the peoples of the world are to be made subject to the patronage and overlordship of those who have the power to enforce it.

That programme once carried out, America and all who care or dare to stand with her must arm and prepare themselves to contest the mastery of the World, a mastery in which

the rights of common men, the rights of women and of all who are weak, must for the time being be trodden under foot and disregarded, and the old, age-long struggle for freedom and right begin at its beginning. Everything that America has lived for and loved and grown great to vindicate and bring to a glorious realization will have fallen in utter ruin and the gates of mercy once more pitilessly shut upon mankind!

The thing is preposterous and impossible; and yet is not that the whole course and action of the German armies has meant wherever they have moved? I do not wish, even in this moment of utter disillusionment, to judge harshly or unrighteously. I judge only what the German arms have accomplished with unpitying thoroughness throughout every fair region they have touched.

What, then, are we to do? For myself, I am ready, ready still, ready even now, to discuss a fair and just and honest peace at any time that is sincerely purposed,—a peace in which the strong and the weak shall fare alike. But the answer, when I proposed such a peace, came from the German commanders in Russia, and I cannot mistake the meaning of the answer.

**Has Once More Said That Force, and Force Alone,
Shall Reign**

I accept the challenge. I know that you accept it. All the world shall know that you accept it. It shall appear in the utter sacrifice and self-forgetfulness with which we shall give all that we love and all that we have to redeem the world and make it fit for free men like ourselves to live in. This now is the meaning of all that we do. Let everything that we say, my fellow countrymen, everything that we henceforth plan and accomplish, ring true to this response till the majesty and might of our concerted power shall fill the thought and utterly defeat the force of those who flout and misprize what we honor and hold dear. Germany has once more said that force, and force alone, shall decide whether justice and peace shall reign in the affairs of men, whether Right as America conceives it or Dominion as she conceives it shall determine the destinies of mankind. There is, therefore, but one response possible from us: Force; Force to the utmost, Force without stint or limit, the righteous and triumphant Force which shall make Right the law of the world, and cast every selfish dominion down in the dust.—From the Official Bulletin.

INTRAVENOUS TREATMENT OF DISEASE

H. H. Helbing, St. Louis, Mo.

So many inquiries have come to me regarding the use of salicylic acid intravenously, that I thought another paper on the subject for the readers of the Therapeutist would be timely and of interest.

I have of late increased the amount of phosphate of sodium in the formula because I found upon standing that the original formula would recrystallize. I now use three drams of sodium to 96 grains of calicylic acid, using the same technique in making the solution as was advised in my original article in this journal and in the "National Eclectic Quarterly."

As perhaps many of the readers of the Therapeutist do not get the "Quarterly" I might relate briefly my results with this treatment in tuberculosis of the hip. I have given the young lady, who is suffering with the disease 12 or 15 treatments consisting of 96 grains and even 100 grains. I think this latter amount of acid may be given as readily as 96.

An X-ray was taken which showed that there was a slight dislocation of the head of the femur upward which seemed to rest on the rim of the acetabulum. This had become gradually displaced, the condition increasing insidiously until she was suffering unbearable pains and could not get out of bed but with difficulty. We first began the treatment according to the original formula and found that it produced sick stomach which continued for a week after a full dose. We replaced the guiacol with subculoid inula-echinacea which did not produce sick stomach.

After each treatment her pains would be relieved for two or three weeks. As time went on the relief would last longer, so that the treatments would not be given so often.

You ask how do I know that it was tuberculosis? Because the radiogram showed a disintegration of the head of the bone. Then a pathologist reported positive tuberculosis by complement fixation test.

Then, too, there was a positive Weiss indicated upon examination of the urine. A leucocyte count indicated that there was no tendency to suppuration.

At last reports the patient was able to get around with a cane, the pains having practically ceased, she had gained in weight, had a good color, and was seemingly well on the road to recovery.

During this winter I have had several cases of tuberculosis of the second and third stages consult me, but I have invariably refused to treat them, for I think the smoke and gas of

the city prevents us from accomplishing much in late stage cases.

A case in the incipient stage was brought to me in October, and being from out of the city, I was sure that she could be benefited. Two of her sisters had died of tuberculosis. She had been coughing for two or three months; had an evening temperature of 100 degrees; had lost in weight, and was short of breath from weakness. Hemoglobin 70 per cent and red cells 5,150,000.

We gave her a half dose the first time and in about ten days the second dose, it being full strength. We sent her home in a couple of days after the second dose, and although she was still weak, her temperature was normal, cough much better, appetite good and she said she felt better. She came back in a couple of weeks for her third treatment, and at this time she had gained 16 pounds, was strong as she had ever been and the only symptom remaining was the cough.

I give the solution credit for the benefit in this case because she had been given the very best care and treatment before taking the intravenous treatment, but she had gradually become worse. She slept out of doors, or rather on a sleeping porch, and had proper diet.

I invariably add subculoid inula-echinacea to the solution instead of guiacol, for I believe it will do just as much good as the guiacol. It is very seldom that a patient will have a chill following the injection I find, and when they do, it comes on within half an hour after giving the treatment.

I intend, as opportunity presents at the city hospital, to try this treatment for septicæmia following abortion, for I believe it will prove a good remedy in such cases.

I have used the solution without the echinacea comp. in cases of arthritis due to uric acid, and it is wonderful how the pains and inflammation will melt away after its use. There is marked improvement in an hour, and in a few hours the joints are supple and the patient is converted from tears to shouts of joy as it were. But why shouldn't it when the uric acid is distributed to the articulation by the blood and it would be natural, that as soon as the acid was neutralized improvement would begin.

I had enough confidence in the remedy to use it on my wife, who has such an aversion to salicylates that she can't take them. In her last attack she was bedfast and hardly able to turn in bed when I used the intravenous treatment. The next day she was walking about the house.

It seems to me that this method of treating rheumatism is far superior to administering the remedies per os. I have

had good results even in the early cases of arthritis deformans. We cannot expect these results in rheumatism, however, unless it is due to uric acid. I have used the treatment in cases with an organic heart lesion without any shock or ill results following.—Ellingwood's Therapeutist.

"PACIFICISM"

Dr. Axel Emil Gibson, Los Angeles, Cal.

Pacifism is a soap-bubble which draws its life and endurance, not from the energies generated in its own movements, but from the boost accorded it in the publicity and general concern given to it by some thoughtless newspapers.

To publish the sensational interviews of its leaders, and put their made-to-order arguments up to the unsophisticated judgments of a sympathetic public unaccompanied by editorial comments as to the deeper significance of the principles involved, is practically a form of propaganda for the movement itself.

The most worthless weed, if supplied with air, water and sun, will speedily develop into a serious agricultural menace; while on the other hand, its exclusion from any outside source of stimulation will as surely lead to its self-extermination.

In its criticism of our government, "Pacificism" does not present a single worthy, sound, independent consideration which is not already a living part in the very organization it sets out to criticise.

For no "Pacifist" can love peace more than the loyal, faithful, self-sacrificing defenders of this nation under God. But in place of being willing to pay the only price for which peace at present can be obtained—which is the price of war with its inevitable sacrifice of life and treasure—the "Pacifist" is ready to sacrifice the integrity of his national selfhood, the solidarity of his country and the safety of the very government by and through which he is honored, supported and protected—ready to fling away the whole glorious heritage of national independence and individual freedom, once won for him and for us by the self-denying, self-sacrificing service of the martyrs and heroes that in their time loved peace so highly, so dearly, so truly as to be ready to die, and did die for it—for the pottage of a false, patched-up, bogus semblance of peace.

The "Pacifist" may love peace; but he loves it like an ignorant, sentimental mother loves her spoiled, egotistic, ungovernable child—too dearly for discipline; he loves it like a beggar loves his rags, exerting his ingenuity in stretching them to continue to serve as a wretched shelter for his depravity, in

place of exerting himself to earn a more worthy equipment; loves it like a parent, who, for fear of the surgical knife, suffers the child to develop into a useless cripple.

Nor do we deny the possible sincerity of the "Pacifist's" motives. But his vision is dimmed and made unreliable by the presence in his mind of an unreasoning fear. Realizing the horrors of war—its submarine terrors, its loss of life, its destruction of civilization, he fails to realize that the only safe, sane and successful way to deal with the menace is to calmly, courageously and determinedly bring the ghostly panorama to a close by a destruction of its very cause, rather than to throw up one's hands in holy horror and try to run away from it.

In his love for individual life the "Pacifist" risks the loss of his national life. For life loved for its own sake leads to its loss. "Whosoever will save his life shall lose it." In the unreasoning fear of death, which springs up from his self-love, the "Pacifist" assumes the attitude of a certain type of soldier who from the very fear of death has been found to commit suicide on the eve of battle. His fears so overruled his reason that in his terror he inflicted upon himself the very fate for which of all he bore the strongest fears.

Life as mere existence is not the aim of humanity. Putrefaction itself is life. Humanity is not—must not be—satisfied with the life of weeds, vermin or reptiles, but endeavor to attain the healthy, virile, humane and useful life of self-determining, courageous citizenship. Not the **descent**, nor even the **level**, but the **ascent** of life is the keynote of evolution.

Through his failure to realize his solidarity and responsibility to humanity outside himself, his family, his friends, the "Pacifist" is circling around in the eddy of fear isolated from the wide-sweeping stream of international, interhuman life. His disloyalty to the government is that of a panic-stricken child, rather than a self-conscious betrayer of his country. For what but an insane mind can oppose the action of a government engaged in a life and death struggle to insure human rights and liberties to a world threatened to extermination by a foe who, with tireless, undiminished energy, breeds terror and despair, murder and rapine to the innocent and guiltless—aiming at nothing less than the ruthless destruction of the core and heart of an entire civilization?

Can human beings, in possession of sanity and reason, conspire to plot against a nation while every fiber of its manhood is enlisted in raising funds and energies to fight the greatest battles of its historical existence? Can a balanced mind look with defiance and enmity upon the efforts of a patriotic, free-

dom-loving people in its labors for love of country and home, for peace and virtue as represented in the "Red Cross," "Liberty Bond," "Food Control," "Industrial Embargo," "Military Service," with ever-present individual sacrifice by rich and poor, high and low, ignorant and college bred—all joining hand and heart to form a chain of consanguinous, love-lit, faith-inspired intersolidarity, moving in unison toward the same sublime aim—democracy—with its freedom to live and to love, to pray and to cherish in the name of the great ideals that blaze out the course for every mind conscious of human brotherhood.

It is the negative, reactionary attitude of the "Pacifists" that reduced the Stockholm convention to a noncommittal, spineless farce; and it is the presence of the same devitalizing, anarchistic element in Russia, inspired by the Germans influencing the soldiers not to fight autocracy, that lies at the root of all the mutinies of the Slav army and the repeated life-and-death struggles of their newly fostered republic.

To accuse our President of having refused peace to Germany proves another failure of the "Pacifists" to see and comprehend the reality of the present crisis. The President is ready to make peace—but with whom? With Wilhelm the Hohenzollern? With the man who deliberately treats time-honored, bona fide international treaties as mere scraps of paper, who has violated every principle of human rights and conscience; who is preparing his peace propositions, not in accord with justice and humanity, but in accordance with the success or failures of his army? Would it be safe to stake the welfare of the entire civilized world on the agreement with such a man, constantly facing the risk of having the unspeakable world-tragedy repeated at the next best opportunity of a retaliating Prussian militarism?

The only party with which peace can safely be arranged is a disillusionized German nation—but the latter has not yet arrived. It is for this new power that Mr. Wilson is waiting to conclude a peace "which will be based on justice and fairness and the common rights of mankind."

But until such time has arrived the crusade against autocracy with its iron rule that "might makes right" must continue. And to sustain this pledge of righteous war, obligated by the land of freedom to the lands of distress, this country must procure and make sure its nerves and sinews of war, which has its consummation in the moral or physical suasion of its individual forces. This is the choice of the enlightened vision, coupled with the heroic act in the spontaneous voluntary individual sacrifice.

Yet where is the crisis involving the necessity of vital sacrifice that has not required coercive discipline? How can we expect average human nature to offer itself willing for the personal sacrifice when we cannot trust ourselves with the voluntary performance of social, fiscal and communal duties of ordinary life. How many children would go to school if not enforced by law? How many adults would pay their taxes if not compelled by authority? How many citizens would come up to their general humdrum duties as men and women if not coerced by law and social custom? Nature herself in the survival of the fittest enforces an inescapable discipline in her domain—and compliance with her rule can alone secure progress of her entities. Hence, to rely upon voluntary forces to fight our battles with a foe whose resources represent half a century of intense military preparedness, involving in its armamentation the latest device of scientific ingenuity, coupled with the utter absence of moral scruples, would simply mean to precipitate upon our head the whole frightfulness of Prussian retaliation.

Nor can the "Pacifists" fall back upon the Bible as holding out prospect of a false, unmanly and unholy peace to the world. "Think not that I am come to send peace on earth (only); I came not to send peace, but a sword." "For this great book," says President Wilson in one of his speeches to the American people, "does not teach any doctrine of 'peace' so long as there is sin to be combated and overcome in one's own heart and in the great moving force of human interrelationship."

At the gateway of every earthly Eden hangs a two-edged sword. Peace like health, is not a gift, but an attainment, and only those who have earned peace shall possess it.

ECLECTIC MEDICAL SOCIETY OF THE STATE OF CALIFORNIA

The forty-fifth annual session of The Eclectic Medical Society of the State of California and the twenty-second annual session of the Southern California Eclectic Medical Association will be held jointly in Symphony Hall, South Hill Street, Los Angeles, on Thursday, Friday and Saturday, May 23, 24 and 25, 1918; the session opening at 10:00 a. m.

The following section officers have been appointed:

Materia Medica and Therapeutics—President, J. A. Munk; Secretary, H. T. Webster.

Practice of Medicine—President, E. A. Ormsby; Secretary, A. P. Baird.

Pediatrics—President, H. V. Brown; Secretary, Janet D. Quinn.

Surgery—President, Ira A. Wheeler; Secretary, O. C. Welbourn.

Obstetrics and Gynecology—President, R. O. Hoffman; Secretary, J. B. Mitchell.

Genito-Urinary and Skin Diseases—President, A. J. Atkins; Secretary, J. B. Bainbridge.

Ophthalmology, Otology, Laryngology—President, H. W. Hunsaker; Secretary, J. C. Solomon.

Roentgenology—President, T. C. Young; Secretary, P. M. Welbourn.

Bacteriology and Pathology—President P. M. Welbourn; Secretary, Chas. Clark.

Hygiene and Sanitation—President, Oran Newton; Secretary, Laura E. Rauch.

Entertainment Committee—J. A. Munk, O. C. Welbourn, Clinton Roath.

State Society—H. C. Smith, Pres.; H. T. Cox, Sec.

Southern California Society—H. V. Brown, Pres.; H. C. Smith, Sec.

SOCIETY CALENDAR

National Eclectic Medical Association meets in Detroit, Michigan, June 18-19, 1918. Dr. W. P. Best, Indianapolis, Ind., President; Dr. H. H. Helbing, St. Louis, Mo., Secretary.

Eclectic Medical Society of the State of California meets in Los Angeles, May, 1918. H. C. Smith, M. D., Glendale, Cal., President; A. P. Baird, M. D., Los Angeles, Secretary.

Southern California Eclectic Medical Association meets in May, 1918. Dr. H. T. Cox, Los Angeles, President; Dr. H. C. Smith, Glendale, Secretary.

Los Angeles Eclectic Medical Society meets at 8 p. m. on the first Monday of each month. F. J. West, M. D., Los Angeles, Cal., President; C. Ohnemüller, M. D., Los Angeles, Secretary.

NEWS ITEMS

Dr. W. E. Smith, Whittier, has a new Cadillac automobile.

Dr. O. E. Dahlen has changed his residence to 666 South Bonnie Brae Street, and will open an office at 660 South Alvarado Street, as soon as the new building at that location is completed.

Dr. B. R. Hubbard, Los Angeles, who suffered a slight stroke of paralysis recently, has recovered and is back at work.

Miss Margaret Hanson, formerly of the Westlake Hospital, was married on April 6th, to J. A. Wood, and will reside in Long Beach. On the same day Miss Suzanne Tracy married Sergeant Samuel Alexander, and will reside in San Diego for the present.

Dr. H. R. Evans, Trona, Cal., a graduate of the C. E. M. C., has been ordered to the Base Hospital, Camp Kearney, for active duty. He was commissioned a first lieutenant some months ago.

Dr. Harry Solomon, of Boston, son of Dr. J. C. Solomon, Los Angeles, has been called into the service and is stationed temporarily at Cape May, New Jersey.

Dr. M. A. Welbourn, with the A. E. F. in France, writes that he is in charge of an Infirmary near the front lines, and if "the American people knew what was going on they would be proud of their troops over here." The Camp Infirmary is located in a shell proof basement under a stone house, and the sick are kept only 24 to 48 hours, at which time they are either returned to the lines or sent to the rear.

Dr. and Mrs. G. W. Weyl have returned to their home in Decatur, Illinois, after spending the winter in California. Dr. Weyl has retired from active practice and spends his time overseeing his farms.

Dr. U. C. Coe of Bend, Oregon, accompanied by his mother, widow of the late Dr. Coe of San Francisco, was in the city for a few days last month. They were enroute to New York to visit a brother of Dr. Coe.

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WHAT IS ECHINACEA? A plant, native to western North America.

WHAT IS THE THERAPEUTIC STANDING OF ECHINACEA? In the opinion of renowned laboratory experts who standardize remedies according to physiological processes, Echinacea has no value. (See Lloyd Brothers' Winter Bulletin, 1915, page 13.) In the opinion of physicians who use remedial agents clinically, and who employ it in disease treatment, Echinacea is of exceeding value. (See Lloyd Brothers' Winter Bulletin, pp. 11 and 12).

WHAT PHYSIOLOGICAL OR POISONOUS QUALITIES HAS ECHINACEA? It has never been known to kill a creature on the operating table, be it reptile, amphibian or other animal. It seems inactive, physiologically. No chemist has reported that he has obtained from it a toxic agent, or any substance destructive to health. Thirty-eight years' continuous use of Echinacea by physicians in active practice, without a single report of injury or death, proves that it has no unkind action.

WHO INTRODUCED ECHINACEA? It was first used by the American Indians, next by the early white settlers, then it became a constituent of a home remedy in Nebraska. At last it came to the attention of Dr. John King, who after special investigation, introduced it under its true name to the medical and pharmaceutical professions.

WHO WAS DR. JOHN KING? A physician of unusual talent and education, a believer in conservative medication, an author of international reputation, an American citizen who opposed wrong, however high the authority, and who supported the right, regardless of self-interest. A believer was he in kindness to the sick, a disbeliever in cruelty, to either sick or well, brute or human. The best versed physician of his day in the clinical uses of American drugs, Dr. John King was acknowledged to be. His greatest pride was to serve in the development of American vegetable remedies. His sincerest hope was to see America professionally independent of the rest of the world.

TRIBUTE OF DR. CHARLES RICE. This is what Dr. Charles Rice, Chairman for thirty years of the Committee on Revision of the Pharmacopeia of the United States, said of Dr. John King and his great work, the American Dispensatory: "It constitutes a precious encyclopedia of medical American plants, and their therapeutical uses. It is a very useful work for reference. Its author is as fine a botanist as a judicial observer of therapeutical effects." *Translation from the French of Dr. Charles Rice's "Note sur Certains Medicaments Vegetaux Americains"*.

WHEN DR. KING SPOKE. The voice of Dr. King in behalf of a remedy, was no idle word. In the maturity of his experience he used Echinacea in his own family, then in his practice, and when he had thoroughly tested the remedy, he gave to the profession his opinion of the drug.

A PREDICTION. Twenty years ago, it was said of Echinacea, "Await the voice of time. If Echinacea stands the test of experience, it will live. If it is inadequate, it will die". Has "Time" spoken?

THE REPLY. The most popular American drug today, (1915), as shown by the orders we have received from pharmacists for true pharmaceutical preparations of any American drug, (not compounds or mixtures named after the drug), for the exclusive use of physicians, is Echinacea.

ECHINACEA TODAY. Our Winter Bulletin, 1915, pages 11 to 13, presents reports from pharmacologists, conflicting with those from practicing physicians, concerning the therapeutic use of Echinacea. That the laboratory standardizers are correct (see page 13), in that Echinacea is not toxic and will not kill any creature, will be generally conceded. That practicing physicians are not capable of judging of the value of the remedies they use in their practice will be universally resisted.

WHAT OF THE FUTURE? Physiological investigators will probably never be able to produce death by the use of any ordinary Echinacea dose. Chemists will probably continue to find Echinacea elusive, so far as the discovery or elaboration of any toxic constituent is concerned. And American physicians who use Echinacea will probably continue to employ and commend it, as they have in the past.

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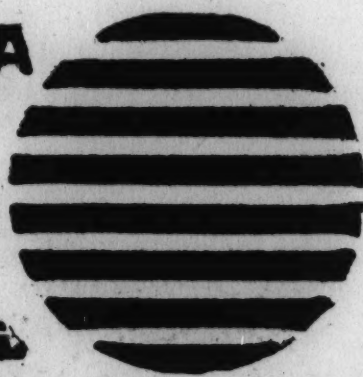
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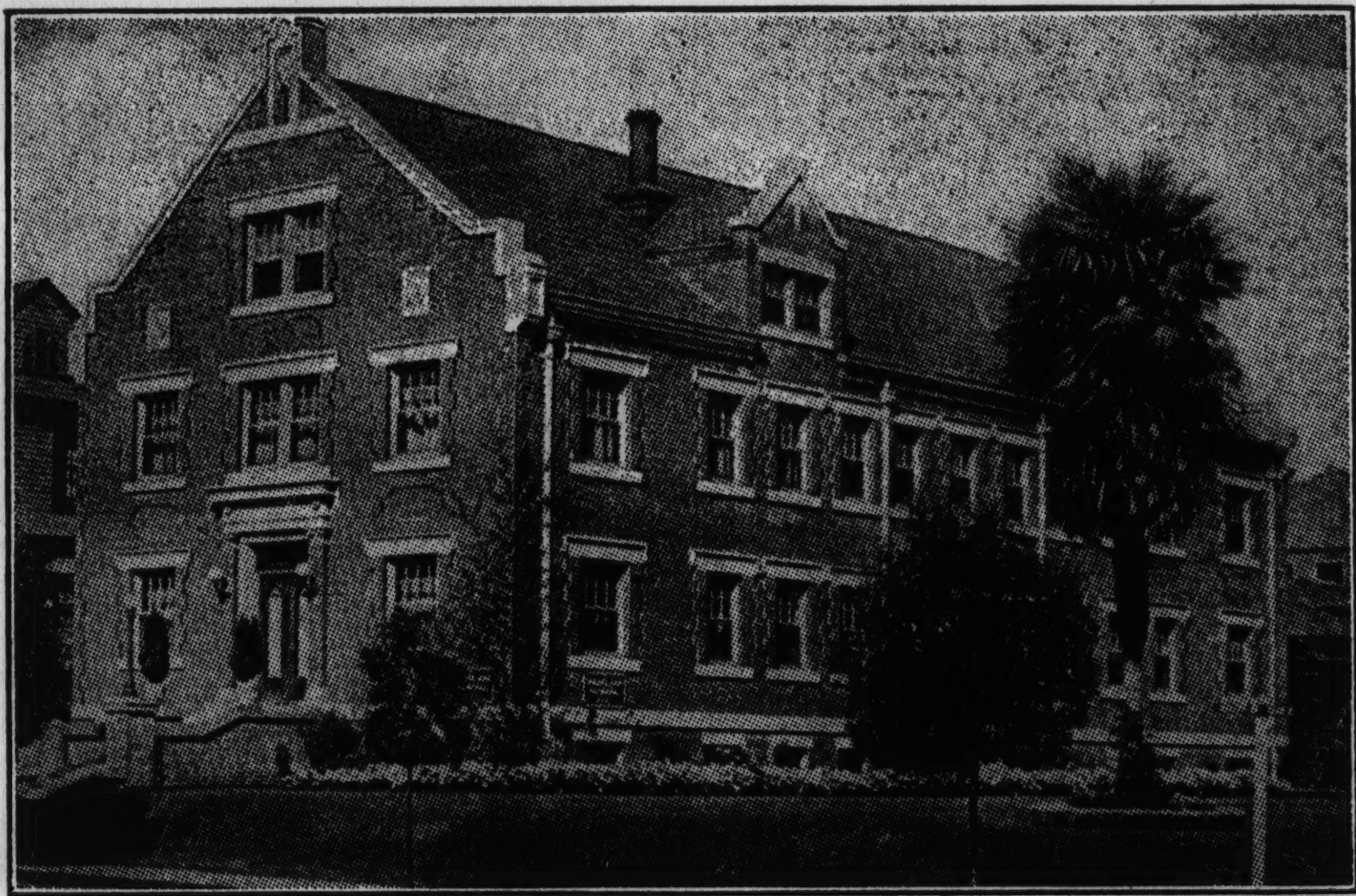
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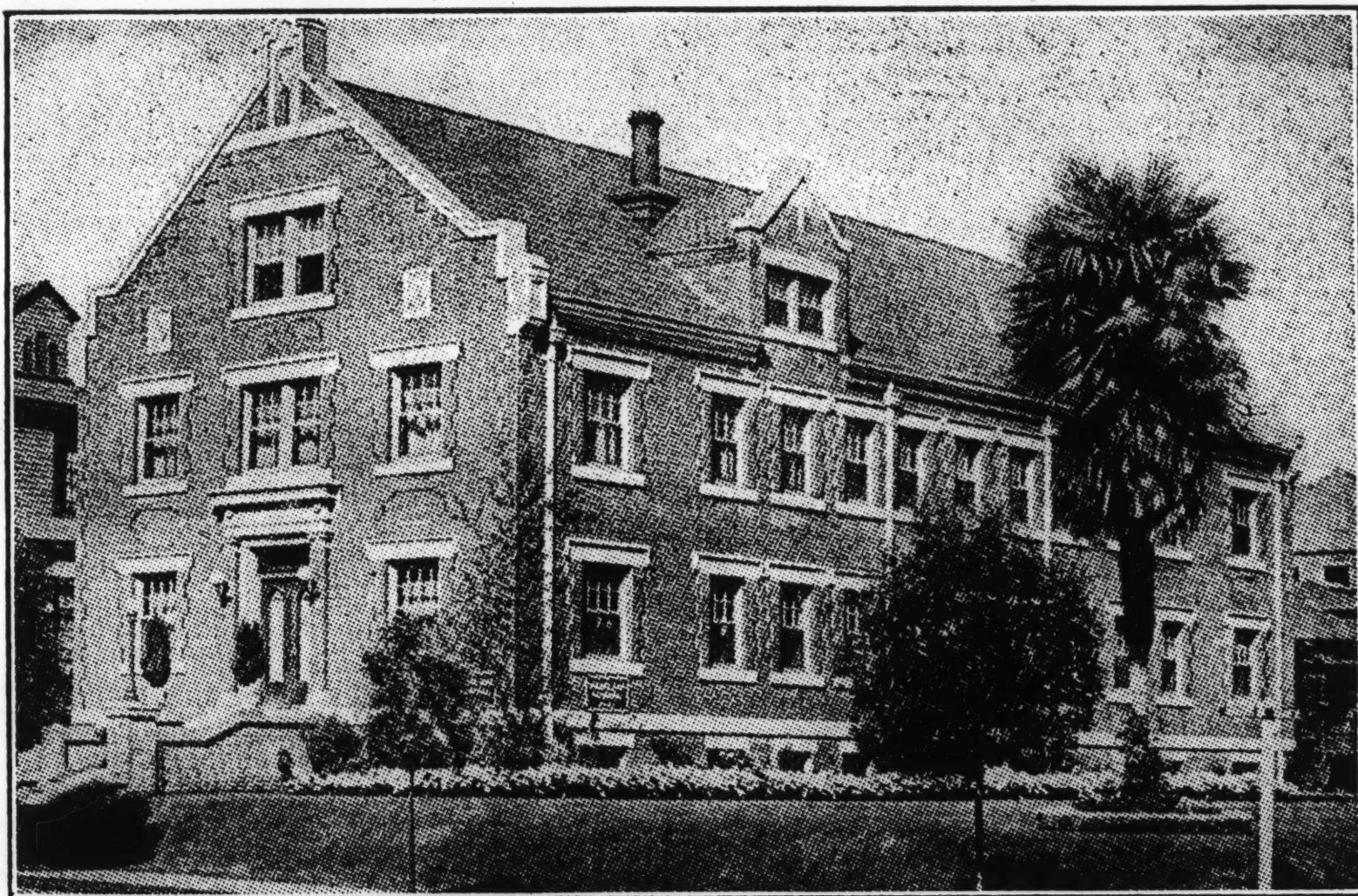
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